

BETSY ROSS NURSING AND REHABILITATION CENTER	
DEPARTMENT:	SUBJECT: REVISED VISITATION
DATE: 11 /17/2021	

POLICY: As per CMS revised nursing home visitation - COVID -19 on 11/12/2021 and NYS DOH revised nursing home visitation guidelines on 11/16/2021 nursing homes may expand visitation and/or activities under the revised guidance of NYS DOH Advisory following the core principles of infection control and prevention, under the conditions and guidelines listed in this policy and procedure.

PROCEDURE:

1. The facility will fully comply with both state and federal reporting requirements including COVID-19 focus surveys, daily HERDS, weekly staff testing surveys, and the federally required weekly submission of COVID-19 data to the National Healthcare Safety Network (NHSN).
2. A copy of the revised facility’s visitation plan will be retained at the facility where it is easily accessible and immediately available upon request of the Department or local health department. The plan will clearly articulate the space(s) to be used for visitation (outdoors and indoors). The plan must reference relevant infection control policies for visitors.
3. If a visitor, resident, or their representative wants to visit, they must be aware of the risks associated with visitation, and the visit must occur in a manner that does not place other residents at risk (e.g., in the resident’s room), the resident must be allowed to receive visitors as he/she chooses.
4. Visitors must wear face coverings or masks when around other residents or healthcare personnel, regardless of vaccination status.
5. Residents who are on transmission-based precautions (TBP) or quarantine can still receive visitors. In these cases, visits should occur in the resident’s room and the resident must wear a well-fitting facemask (if tolerated).
6. Before visiting residents, who are on TBP or quarantine, visitors should be made aware of the potential risk of visiting and precautions necessary to visit the resident and visitors must adhere to the core principles of infection prevention. They must wear a mask during visits or other appropriate PPE regardless of vaccination status, and visits will occur in the resident’s room.
7. Visitors who have a positive viral test for COVID-19, symptoms of COVID-19, or currently meet the criteria for quarantine, will not be permitted to enter the facility.
8. Continue to screen visitors and visitors must pass the health screening to enter for these visitations.
9. Visitors must be able to adhere to the core principles, including infection prevention and control policies, and staff will provide monitoring for those who may have difficulty adhering to core principles.

10. The facility will widely communicate to residents, staff, and visitors; and the facility will always allow indoor visitation. Facility will not limit the number of visitors per resident at one time. Visitation does not have to be scheduled or timed.
11. During indoor visitation, visitors are encouraged to limit their movement in the facility. For example, visitors should not walk around different halls of the facility. Rather, they should go directly to the resident's room or designated visitation area.
12. Written screening protocols for monitoring of all staff during each shift, and each resident daily, and all persons entering the facility or grounds of such nursing home, including visitors, vendors, students, and volunteers will continue.
13. Visits can be conducted inside or outside as per resident and representative wish and when practicable. Aside from weather considerations (e.g., inclement weather, excessively hot or cold temperatures, poor air quality).
14. Adequate staff will be present to allow for personnel to help with the transition of residents, monitoring of visitation, and cleaning and disinfecting of areas used for visitation after each visit using an EPA-approved disinfectant.
15. Appropriate signage regarding facemask or face covering utilization and hand hygiene, and applicable floor markings to cue social distancing delineations will be always in place.
16. Screening for signs and symptoms of COVID-19 will occur prior to resident access. Documentation of screening will be maintained onsite and available upon request by the DOH for purposes of inspection and potential contact tracing.
 - a. Documentation will include the following for each visitor:
 - i. First and last name of the visitor;
 - ii. Physical (street) address of the visitor;
 - iii. Daytime and Evening telephone number;
 - iv. Date and time of visit; and
 - v. Email address if available
17. Adequate PPE will be made available for residents to wear such as a face mask, if medically able to utilize a face covering during visitation.
18. Visitors must wear a face mask when on the premises of the nursing home and maintain social distancing. The facility will have an adequate supply of masks on hand for visitors and make available to visitors who lack an acceptable face covering.
19. The facility will provide alcohol-based hand rub to visitors or representatives of the long-term care ombudsman visiting residents and those individuals are able demonstrate appropriate use.

20. The facility will have available a quick, easy to read fact sheet outlining visitor expectations including appropriate hand hygiene and face coverings. The fact sheet is available upon initial screening to all visitors.
21. Group activities will be permissible when the facility is not experiencing an outbreak on that particular unit and when space allows for appropriate social distancing.
22. Weather permitting, residents may also be assisted to go outdoors with staff supervision and the appropriate infection control, safety and social distancing requirements maintained.
23. All non-essential personnel are subject to the same infection control requirements as staff, including but not limited to testing for COVID-19 with the same frequency as for staff; screening, wearing a mask, performing hand hygiene, maintaining social distancing.
24. The facility will allow for students and trainees enrolled in programs to become licensed, registered, certified, board eligible or otherwise to complete a program for health care professionals to receive training and otherwise participate in duties relevant to their program of training provided the nursing home environment is appropriate to the student's education, training and experience. Students will follow the guidelines established in their agreement between the nursing home and academic institution.

Compassionate Care Visits:

Compassionate care visits are always allowed for all residents, in accordance with CMS regulations.

Compassionate care visits should include:

- Newly admitted residents with difficulty adjusting to the facility environment and lack of in-person family support.
- Residents recently grieving the loss of a friend or loved one.
- Residents who previously received in-person support and/or cueing from family for eating and drinking and are now experiencing dehydration and/or weight loss.
- Residents who are exhibiting signs and symptoms of emotional distress including, but not limited to, seldom speaking or crying more frequently (when the resident had rarely cried in the past), refusing to participate in an activity or activities, staying in bed longer than usual, or exhibiting behavior considered abnormal for the individual.
- Residents who receive religious or spiritual support from clergy or another layperson.

Core Principles of Infection Control and Prevention for Visitation:

- All visitors will perform hand hygiene upon entry (before screening), before donning PPE and after doffing PPE, before and after contact with the resident, after using the bathroom, and when visibly soiled.
- All visitors will wear a facemask or face covering at all times while in the facility.
- All visitors will remain at least six feet apart from others while in the facility.
- All visitors will undergo screening for signs and symptoms of Covid-19 at entry, and will not be permitted access if screening questionnaire and temperature check are not cleared.